



EVALUATION OF THE MINIMUM SERVICE STANDARDS POLICY FOR HYPERTENSION HEALTH SERVICES AT BIROBULI COMMUNITY HEALTH CENTER, PALU CITY

Suasa^{1*}, Muhammad Rapi²

Universitas Tadulako, Indonesia

*Email Correspondence: suasafisif1962@gmail.com

ABSTRACT

This study aims to evaluate the achievement of the Minimum Service Standards (SPM) for Hypertension health services at the Birobuli Community Health Center. This research adopts a descriptive type with a qualitative approach. Data collection techniques involved observation, interviews, and documentation. Data analysis used the interactive model of Miles and Huberman, consisting of data condensation, data presentation, and conclusion drawing. The results showed that overall, the implementation of the Minimum Service Standards (SPM) policy at Birobuli Community Health Center was quite effective, efficient, and met the standards of adequacy, equity, responsiveness, and appropriateness. Despite some obstacles, the Birobuli Health Center has made efforts to overcome them.

Keywords: Policy Evaluation, Minimum Service Standards, Hypertension, Birobuli Health Center.

INTRODUCTION

Public policy plays a crucial role in state administration. Good governance is reflected through sound policies, and sound policies result from proper policy processes. One of the essential public policies benefiting society is the application of Minimum Service Standards (SPM) in healthcare. The SPM serves as a guideline for officials to provide public services according to their authority. The goal of the SPM is to encourage high-quality, transparent, accountable services that meet the expectations and needs of both service providers and recipients.

The Birobuli Community Health Center, as a public institution providing healthcare services, must continuously apply policies that encourage patients to utilize health services optimally. One of the critical health services is managing hypertension. According to the World Health Organization (WHO), the prevalence of diagnosed hypertension in 32 countries is 36.7% among men and 50.8% among women. In Indonesia, the prevalence of hypertension, diagnosed or treated with medication, among those over 18

is 65.8%. Hypertension is the top disease based on total patient visits at the Birobuli Health Center in 2023, with a 68.61% prevalence.

The challenges in implementing the Minimum Service Standards (SPM) policy for hypertension at the Birobuli Health Center include limited understanding of SPM indicators among staff and weak evaluation practices. Moreover, patients often neglect to monitor their blood pressure, and the health center's education efforts on hypertension control are insufficient.

Based on these issues, it is crucial to evaluate the SPM policy for hypertension at the Birobuli Health Center. This evaluation will critically examine the program, activities, and policies to provide a foundation for improving SPM implementation and achieving optimal results.

LITERATURE REVIEW

The term "policy" essentially refers to a set of alternatives selected based on certain principles, making policy an in-depth analysis of various options, leading to the best



alternative decision. The concept of public policy assumes the existence of a domain in life that is not private or purely individual, but shared or public. Public policy refers to activities deemed necessary to be regulated or intervened upon by the government, social rules, or collective action (Parsons, 2011).

According to Dunn (2003), public policy is a complex pattern of interdependent choices, including decisions not to act, made by government bodies or offices. Dunn emphasizes that public policies are collective choices dependent on one another, where government offices or agencies make decisions regarding actions or non-actions. Once a policy is formulated, it must be implemented by administrative units that mobilize financial and human resources, and the policy should be evaluated to ensure it meets its intended objectives.

Chandler and Plano, as cited in Keban (2008), define public policy as the strategic utilization of resources to solve public or governmental problems. Shafritz and Russell describe public policy as whatever a government chooses to do or not to do, depending on what best achieves its goals (Keban, 2008).

Lasswell (1948) expands the definition of policy to include the need for social goals to be explained by scientific fields. The field of policy science encompasses: (1) methods for researching the policy process; (2) outcomes of policy studies; and (3) research findings that contribute most to fulfilling the intelligence needs of the current era.

Anderson (1998) defines public policy as a series of intentional activities undertaken by one or more actors, addressing specific problems or matters of public interest. This definition emphasizes actions taken rather than merely proposed. Public policy differs

from a decision, which represents a choice among various alternatives.

Public Policy Evaluation Model

In evaluating public policy, specific criteria are developed to avoid bias and to guide evaluators. Evaluation indicators help measure whether a public policy succeeds or fails. According to Jones (1991), evaluation involves functional activities such as specification, analysis, and recommendation. Dunn (2003) highlights key criteria for policy recommendations, which include:

1. **Effectiveness:** Evaluating whether a policy alternative achieves the desired results or meets its objectives. Effectiveness is closely tied to technical rationality, typically measured in units of products or services or monetary value.
2. **Efficiency:** Evaluating the amount of effort required to achieve a certain level of effectiveness. Efficiency, synonymous with economic rationality, is measured as the relationship between effectiveness and the required effort, often expressed in monetary costs.
3. **Adequacy:** Evaluating whether the level of effectiveness satisfies the needs, values, or opportunities related to the issue at hand. Adequacy focuses on how well a policy meets the desired outcomes.
4. **Equity:** This refers to the distribution of the effects and efforts of the policy among different groups in society. Equity policies focus on fair distribution of resources, income, education, or services, often grounded in the principle of fairness or equality.
5. **Responsiveness:** Evaluating whether a policy addresses the preferences, needs, or values of particular groups in society. Responsiveness is crucial as a policy may meet all other criteria but still fail if it does



not respond to the actual needs of the target groups.

6. **Appropriateness:** This criterion is closely related to substantive rationality. It evaluates whether the policy goals and the underlying assumptions are valid and well-founded. Appropriateness assesses the overall value and relevance of the policy.

Dunn emphasizes the product aspect of policy evaluation, while Jones focuses on the process. Bardach integrates both by evaluating product and process, examining institutional authority, commitment, capability, and organizational support to assess policy performance (Kurniati et al., n.d.).

METHOD

This study adopts a descriptive research type. Descriptive research involves providing a detailed, accurate description based on data analysis about the subject under study. According to Nasir (2003), descriptive research aims to systematically, factually, and accurately describe facts, characteristics, and relationships among phenomena being investigated.

The qualitative research approach forms the foundation of this study. According to Sugiyono (2009), qualitative research involves studying natural settings where the researcher acts as the key instrument. Data collection is performed through triangulation (combined techniques), data analysis is inductive, and the findings emphasize meaning rather than generalization.

Data Collection Techniques
Data collection in this study involved three primary techniques:

1. **Observation:** This technique required the researcher to be present on-site to observe

the behavior and activities of individuals at the research location. Observation is essential in qualitative research as it allows for firsthand experience in gathering data related to time, place, actors, and activities (Kartono, 1990).

2. **Interview:** Interviews involve a conversation between the researcher (interviewer) and the respondent (interviewee) to gather answers relevant to the research objectives. This technique helps acquire in-depth information from respondents (Kartono, 1990).
3. **Documentation:** This technique involves collecting data from documents, including the profile of the Birobuli Health Center, staff conditions, the implementation process of the Minimum Service Standards (SPM), activity reports, and other necessary documents.

Data Analysis Techniques

The data analysis in this qualitative study was conducted interactively, as illustrated by three main stages of analysis:

1. **Data Condensation:** This is the process of selecting, focusing, simplifying, abstracting, and transforming the data collected from field notes, interview transcripts, and documents. Data condensation enables researchers to draw final conclusions and verify them.
2. **Data Presentation:** Data presentation involves organizing the information in a structured format that allows for conclusion drawing and decision-making. In qualitative research, data is often presented in narrative text to convey cohesive, understandable information.
3. **Conclusion Drawing and Verification:** The final stage of qualitative research involves summarizing the findings and verifying their accuracy and relevance.



The conclusions drawn must be tested for their truthfulness and consistency with the data obtained from the research location.

RESULTS AND DISCUSSION

Effectiveness

Effectiveness in this study relates to the achievement of the Minimum Service Standards (SPM) for hypertension health services at the Birobuli Community Health Center. The research findings indicate that the health center has provided services in accordance with the SPM. However, there are several factors that hinder the optimal implementation of the SPM policy. One key challenge is the fact that many individuals suffering from hypertension do not regularly monitor their blood pressure or fail to follow the instructions given by the health center. This is reflected in the interview data (Informant IU 2 and IT 1), which highlights that, despite the Birobuli Health Center's efforts, community support is still lacking. Moreover, the health center staff need to work more collaboratively to ensure that services are delivered at their fullest potential (Informant IU 1).

Efficiency

In terms of efficiency, the research analyzes the measures taken by the Birobuli Health Center to address the challenges encountered in providing hypertension services. Based on interviews with informant IU 1, the health center has taken several steps to improve communication among staff and enhance service quality. These efforts include:

1. Conducting regular evaluations to maintain stable communication between staff, reducing the risk of misunderstandings or communication gaps.

2. Encouraging patients to always bring their complete personal identification when visiting the health center to streamline the service process.

Adequacy

The adequacy of the facilities and human resources at the Birobuli Health Center was also evaluated. According to interviews with informants IU 3, IT 3, IT 4, and IT 5, the health center's facilities meet the requirements of the SPM for hypertension, although some additional equipment is needed to further enhance patient comfort. Additionally, the number of healthcare workers is deemed sufficient to meet the needs of hypertension services, although some staff members are overburdened due to multiple responsibilities (Informant IU 1).

Equity

Regarding equity, the research examines whether the Birobuli Health Center has effectively communicated the SPM policy to healthcare workers. Based on the interviews, the center has conducted proper socialization of the SPM policy, with a focus on improving staff performance to meet the health needs of the community. This socialization effort ensures that healthcare workers understand the services they are expected to provide and strive to meet patient needs optimally (Informant IU 2 and IT 1).

Responsiveness

The study also explores whether the Birobuli Health Center responds to feedback and criticisms from the community. The findings suggest that the health center is highly responsive to public input and is committed to improving its services. This is demonstrated through the availability of both offline and online channels for all segments of



the community to provide feedback (Informant IU 2, IT 2, and IU 3).

Appropriateness

Lastly, the appropriateness of the SPM policy was assessed to determine whether it effectively supports the improvement of service quality at the Birobuli Health Center. The interviews indicate that the SPM policy is well-aligned with the center's efforts to enhance service quality. It serves as a useful guideline for delivering services according to patient needs and assessing the performance of healthcare workers individually, which contributes to the overall improvement of service quality (Informant IU 2, IT 2, and IU 3).

Institutional Vision and Mission

The Birobuli Health Center operates under the vision of "High-Quality Services Toward a Healthy Tatura Community." Its mission includes:

1. Providing high-quality, professional services,
 2. Encouraging the community to adopt clean and healthy living behaviors,
 3. Strengthening cross-sectoral collaboration, and
 4. Enhancing community empowerment.
- The health center upholds values such as punctuality, cooperation, loyalty, competence, and politeness (Puskesmas Birobuli, 2023).

Quality Policy

The health center's quality policy emphasizes patient safety and aims to deliver services that satisfy customer expectations while achieving its vision and mission. Key elements of the policy include participation in quality and performance programs,

collaborative leadership in patient safety initiatives, and the development of multidisciplinary quality plans that prioritize patient safety, performance measurement, and continuous improvement efforts (Puskesmas Birobuli, 2023).

Human Resources

In 2023, the Birobuli Health Center was supported by 89 healthcare professionals, including general practitioners, dentists, nurses, midwives, pharmacists, and other specialists. The distribution of healthcare workers includes six general practitioners, two dentists, two pharmacists, 12 nurses, 25 midwives, and other supporting staff (Puskesmas Birobuli, 2023).

Facilities and Equipment

The health center is equipped with adequate facilities, including registration areas, general examination rooms, dental and oral health services, maternal and child health (MCH) services, laboratory facilities, and more. Supporting infrastructure includes ambulances, computers, refrigerators, air conditioners, and other equipment. The center also has networks with other health facilities in the region, such as hospitals, clinics, pharmacies, and private midwifery practices (Puskesmas Birobuli, 2023).

Healthcare Financing

The health center's funding sources include BLUD (Local Public Service Agency) funds, Health Operational Assistance (BOK), and regional budget (APBD). In 2023, the total budget for the Birobuli Health Center amounted to IDR 1,583,326,900, consisting of IDR 1,108,833,900 from the National Health Insurance (JKN), IDR 419,393,000 from BOK, and IDR 55,100,000 from non-



capitation sources. The budget was fully utilized, with expenditures reaching 100% (Puskesmas Birobuli, 2023).

CONCLUSION

Overall, the evaluation of the Minimum Service Standards (SPM) for hypertension health services at the Birobuli Community Health Center, Palu City, shows that the implementation of SPM has been reasonably effective, efficient, adequate, equitable, responsive, and appropriate. Despite several challenges, such as the lack of community support and some healthcare workers facing excessive workloads, the health center has made efforts to address these issues. The Birobuli Health Center has implemented regular evaluations to improve communication among staff and provided adequate healthcare services according to SPM guidelines. In addition, the health center has taken initiatives to improve responsiveness by offering various channels for feedback from the community.

The implementation of SPM can be deemed successful and aligned with the desired goals. With continuous efforts to overcome existing obstacles, especially in enhancing patient participation and further improving healthcare worker efficiency, the Birobuli Health Center can maintain and even enhance the quality of its hypertension health services in the future.

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